



2841 \$

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/021,333
		Filing Date	December 12, 2001
		First Named Inventor	Zahriya <i>et al.</i>
		Examiner Name	Randy Gibson
		Group Art Unit	2841
Total Number of Pages in This Submission	8	Attorney Docket No.	A-69361/MSS (469118-6)

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Check in the amount of \$475.00 (for 3 rd ext. of time); and
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	self-addressed stamped Postcard.
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, No. of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Maria S. Swiatek, Esq. DORSEY & WHITNEY LLP 4 Embarcadero Center, Suite 3400 San Francisco, CA 94111 Telephone : 650-494-8771	Customer Number 32940
Signature		
Date	March 9, 2004	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with Sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:		
Typed or printed name	Kari Bateman	
Signature		Date March 9, 2004



AMENDMENT FEE CALCULATION 2004

Complete if Known

Application No.	10/021,133
Filing Date	December 12, 2001
First Named Inventor	Zahriya, et al.
Group Art Unit	2841
Examiner Name	Gibson, Randy
Atty. Docket Number	A-69361/MSS

Claims as Amended in Response to Office Action dated: September 9, 2003

METHOD OF PAYMENT (Check One)	AMENDMENT FEE CALCULATION (Continued)																																																																												
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account No.: <u>50-2319</u> Deposit Account Name: <u>DORSEY & WHITNEY LLP</u></p> <p><input type="checkbox"/> Charge any additional fee required under 37 C.F.R. 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status (see 37 C.F.R. 1.27)</p> <p>2. <input checked="" type="checkbox"/> Check Enclosed</p>	<p style="text-align: center;">3. ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Large Entity Fee</th> <th style="width: 15%;">Small Entity Fee</th> <th style="width: 50%;">Fee Description</th> <th style="width: 15%;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>110</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>420</td> <td>210</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>950</td> <td>475</td> <td>Extension for reply within third month</td> <td>475.00</td> </tr> <tr> <td>1,480</td> <td>740</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>2,010</td> <td>1,005</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>330</td> <td>165</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>330</td> <td>165</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>290</td> <td>145</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Terminal Disclaimer Fee</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Petition to revive – unavoidable</td> <td></td> </tr> <tr> <td>1,330</td> <td>665</td> <td>Petition to revive – unintentional</td> <td></td> </tr> <tr> <td>1,330</td> <td>665</td> <td>Utility/Reissue issue fee (inc. advance copies)</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of IDS</td> <td></td> </tr> <tr> <td>770</td> <td>385</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td colspan="4">Other fee (specify):</td> </tr> <tr> <td colspan="3" style="text-align: right;">Subtotal (2)</td> <td>475.00</td> </tr> <tr> <td colspan="3" style="text-align: right;">Total Amount of Payment:</td> <td>475.00</td> </tr> </tbody> </table>	Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid	110	55	Extension for reply within first month		420	210	Extension for reply within second month		950	475	Extension for reply within third month	475.00	1,480	740	Extension for reply within fourth month		2,010	1,005	Extension for reply within fifth month		330	165	Notice of Appeal		330	165	Filing a brief in support of an appeal		290	145	Request for oral hearing		110	55	Terminal Disclaimer Fee		110	55	Petition to revive – unavoidable		1,330	665	Petition to revive – unintentional		1,330	665	Utility/Reissue issue fee (inc. advance copies)		130	130	Petitions to the Commissioner		180	180	Submission of IDS		770	385	Request for Continued Examination (RCE)		Other fee (specify):				Subtotal (2)			475.00	Total Amount of Payment:			475.00
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1. EXTRA* CLAIM FEES																																																																													
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86	43	Independent claims in excess of 3																																																																											
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Submitted by:

Name: Maria S. Swiatek	Reg. No.: 37,244	Telephone: 650-494-8700
DORSEY & WHITNEY LLP	Four Embarcadero Center, Suite 3400 San Francisco, California 94111-4187	CUSTOMER NUMBER 32940
Signature:		Date: March 9, 2004



UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

Zahriya, et al.

Serial No.: **10/021,133**

Filed: **December 12, 2001**

For: **DIGITAL SCALE WITH
REMOVABLE TOOLS**

Examiner: **Gibson, Randy**

Group Art Unit: **2841**

San Francisco, CA 94111

Date: March 9, 2004

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This Amendment is in response to the Office Action dated September 9, 2003 received in the above- referenced application. A petition for a three month extension of time with the requisite fee is enclosed herewith, bringing the period of response to March 9, 2004.

Please amend the application as follows.

A listing of claims begins on page 2.

A replacement Abstract begins on page 3.

Remarks begin on page 4.

03/15/2004 WABRHAM1 00000003 10021333

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475.00 OP